

IN THE CIRCUIT COURT FOR THE STATE OF OREGON FOR MULTNOMAH COUNTY
RELEASE ORDER AND AGREEMENT

Self Bail

State of Oregon vs. NOORAH, Abdulrahman
Defendant
aka: TN
1630 SW Clay AP 40
Address Portland OR 97266
City, State, Zip (971) 282-6606 9-9-95 799251
Phone DOB SWIS

Offense DV
Manslaughter I
Reck Driving
Fail Perf DOD - Inj
Reck Endanger x 3

Case No. 16CR52157

RELEASE AGREEMENT

Pursuant to the provisions of ORS 135.250, the Defendant named above is released subject to the following conditions:

1. To appear at all times and places ordered by the Court until discharged or final order of the Court.
2. Not to leave the State of Oregon without permission of the Court
3. To obey all laws and Court orders and comply with any conditions the court may impose including CSS release conditions.
4. To keep Defendant's attorney and Close Street Supervision, (503) 988-3714 (if released on recog), advised of Defendant's whereabouts.
5. That security posted on Defendant's behalf will be applied to any fine, costs or restitution imposed on this case or any other case.
6. That Defendant voluntarily waives extradition on the above listed offenses if defendant violates any condition of the agreement and Defendant is arrested outside the State of Oregon.
7. The Defendant is to report IN PERSON to CSS, room 209, on _____ (date) at _____ (time).
8. TO NOT HAVE ANY CONTACT WITH THE VICTIMS OF THE OFFENSES UNLESS SPECIFICALLY AUTHORIZED BY THE COURT.

Additional Conditions: _____

IF bail is posted,
Ret to CSS Kolberg
9/9/16 @ 1300pm
x 86458

SEP 11 2016

Defendant is warned that violation of these conditions will have the following consequences:

1. That a violation of the release conditions will result in revocation of this Release Order, forfeiture of any security posted under this Order, arrest and possible punishment by contempt of Court or a separate criminal charge for failure to appear, or both.
2. That Defendant is subject to immediate arrest by a peace officer if Defendant has any unauthorized contact with the victim and the offense for which Defendant is released involved domestic violence.
3. That if Defendant fails to appear for any appearance for an offense declared to be a violation by the District Attorney, then the Court may enter a conviction and monetary judgment up to the maximum amount of fines, assessments, restitution and other costs allowed by law for the offense.

Defendant agrees that should it be determined that his/her release from custody was without judicial authority, this Release Order is void and defendant is subject to re-arrest without a warrant.

I have read, understand, and agree to abide by the above listed conditions; I understand the consequences of violating these conditions, and agree to waive extradition on the above listed offenses if I violate any condition of this agreement and I am arrested outside of this State.

Defendant [Signature]

Date 09/09/16

Witness [Signature]

SURETY VERIFICATION OF NET WORTH AND AGREEMENT

Full Security \$ 1,000,000 100% _____ 10% 100,000 Security Receipt No. 650558
I hereby certify that my total unencumbered assets are equal to no less than double the total amount of security set above. I understand that if the Defendant fails to comply with any of the conditions set on this Release Order, I am liable for the full amount of the security set. I further understand that security release costs plus any fines or other financial obligations assessed against the Defendant in this case or any other case will be taken out of the security amount posted.

Name (Please Print) Self bail - Same as defendant

Signature [Signature]

Address _____

Date 09/09/16

City, State, Zip _____

Phone 971-282-6606

SUPERVISORY AGREEMENT - THIRD PARTY CUSTODIAN

I agree to supervise and be responsible for the above named Defendant and to notify Close Street Supervision office (Phone: (503) 988-3714) immediately of any breach of this agreement and to make every effort to assure that the Defendant appears at all scheduled hearings. I understand that to knowingly aid the Defendant in any breach of this agreement or to knowingly fail to report such breach is punishable by contempt of Court.

CLOSE STREET SUPERVISION

Name of Custodian (Please Print) _____

Signature Kari Kolberg

Address ROOM 209, 1120 SW THIRD AVENUE

Date 9.8.16

Address PORTLAND, OREGON 97204

Phone (503) 988-3714

City, State, Zip _____

Phone _____

NEXT COURT DATE AND TIME

Courtroom 208 at 9:00a on 10/21/16

☐ JUSTICE CENTER: 1120 SW Third Ave., Portland, OR 97204

☒ COURTHOUSE: 1021 SW Fourth Ave., Portland, OR 97204

DEFENSE ATTORNEY'S NAME AND PHONE NUMBER

Name _____

Phone _____

SUBSCRIBED AND SWORN TO OR AFFIRMED BEFORE ME AND RELEASE SO ORDERED THIS _____ day of _____, _____

Form Prepared by Deputy Kolberg 33127
(Judge/Recognizance Staff/ Officer)
JZ 93156

Authorized by 1st Judge Kantor
(Judge/Recognizance Staff/ Officer)